

CLAIMS ONLY							Application Number		Filing Date	
							Applicant(s)			
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/						51			
2		/					52			
3							53			
4		/					54			
5		/					55			
6		/					56			
7							57			
8		/					58			
9	/						59			
10		/					60			
11	/						61			
12		/					62			
13							63			
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43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep	←		←		←		Total Indep	←		←
Total Depend		←		←		←	Total Depend		←	
Total Claims							Total Claims			

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